

occurred, which was subdued by compression of the carotid of the left side and the orifices of the wound. The following night the hemorrhage recurred, and was with difficulty restrained by pressure, which caused the patient considerable pain. Considerable blood was lost. Dr. E., with the assistance of Dr. Platt, ligatured the left carotid artery below the omo-hyoidens muscle; "an operation attended with a good deal of difficulty, owing to the swollen state of the parts, the necessity of keeping up pressure, the bad position of the parts owing to the necessity of keeping the mouth in a certain position to prevent his being strangled by the blood, and the necessity of operating by candle light." No unpleasant symptoms followed the tightening of the ligature save a slight coldness on that side of his face and an occasional throbbing pain beneath the sternum, and in the direction of the ligatured vessel. The patient appeared to be doing well until the eleventh day from the accident, when he had a return of hemorrhage, which was readily subdued by pressing upon the right carotid and the two orifices of the wound. There was a slight pulsation in the left temporal artery, the first felt since the application of the ligature. There was a return of the hemorrhage during the night and several times the next forenoon. He could not endure pressure upon the right carotid for any length of time, and it was necessary to depend upon pressure upon the two orifices of the wound, which caused a good deal of pain, especially in the direction of the ninth pair of nerves. He was becoming very restless under the pressure, and was very anxious to have something done to relieve him. With the assistance of Drs. Platt and Shepherd, Dr. E. applied a ligature to the right carotid, four and one half days from the time the left was ligatured. The operation was attended with no difficulty; the internal jugular vein overlapped the artery to some extent; the descendens noni and par vagum were found in their place. Two ligatures were passed beneath the artery, and then tied, one of them over a cork applied to the vessel. For convenience, he was kept in the sitting posture during the operation; when the ligature was tightened no disagreeable effects followed; no fainting; no bad feeling about the head; and all the perceptible change was a slight paleness, and a cessation of pulsation in both temporal arteries, and of the hemorrhage. In the course of the next hour, his pulse increased in frequency from 95 to 140, but soon came down to 110. No difficulty of breathing. The first ligature was cut over the cork and removed, the other tied, and the wound dressed with sutures and adhesive plaster. For the first twenty-four hours the patient remained comfortable, but at the end of that time a hacking cough and difficulty of breathing came on, with pain in the chest and heaviness; pulso 120, rather full, for his reduced state. Blood was detracted by opening a vein in the arm, and by cupping and belladonna and tincture of aconite; under which treatment, the difficulty of breathing subsided; pulso came down in a few days to 80; neither of the wounds healed by first intention, but soon commenced discharging a healthy-looking pus. The ligature from the left carotid came away on the 17th day, and that from the right on the 14th from its application. The wound on the left side continued to discharge for several weeks, when the portion of the artery between the ligature and wound sloughed, and came away in three pieces at different times. The young man now enjoys comfortable health, and is attending to business. No perceptible pulsation can be felt in either temporal artery.

*Oxalic Acid in the Rhubarb or Pie Plant.*—A family of four persons, in this city, recently, after eating very freely of the leaves of the domestic rhubarb or pie plant, boiled and served as "greens," were all of them, shortly after, seized with severe vomiting. In one of the persons, it was followed by gastritis. The others recovered directly after the vomiting. We have occasionally seen notices in the newspapers of this plant producing noxious effects.—*Buffalo Medical Journal*, No. 1.

In the second number of the same Journal, there is an analysis of the rhubarb plant, by Lieutenant Long, U. S. army, M. D. From this, it appears, that the small bundles in market, weighing about 1lb, contains 2½ grs., or rather more than two scruples of oxalic acid. "The minimum fatal dose of the crystallized acid on record in standard works is half a drachm, but it would, doubtless, be unsafe to take a much smaller dose than this of the acid in a free state. Yet as the diluted acid is regarded and used as a safe refrigerant in fevers, and as a portion of it exists in the pie-plant in combination with lime and is therefore inert, it would seem

hardly probable that any deleterious effects would result from the use of the plant."

In one experiment, Dr. Long used the petioles or stalks, and in the other, both the stalk and the leaf, without any appreciable difference in the result.

These results are certainly curious, and we hope they will induce further inquiry. So far as the root of rhubarb has been examined, it would not seem to contain any free oxalic acid, but oxalate of lime varying according to the different localities producing it, from 11 to 35 or 40 per cent. (See Christison's Dispensatory. Art. *Rheum*.)

T. R. B.

*Increased quickness of the Pulse, apparently resulting from Tumour of the thigh.*—A curious case of this is reported by Dr. E. L. DUMEX, in the *Western Lancet*, (July, 1845.) The patient was a black man of middle age, with a large tumour upon the inner half of the thigh. He had no pain in the limb, and the tumour might be freely handled without any inconvenience to him. There was nothing in the appearance or position of the tumour to justify the belief that it was of a malignant character, and yet the pulse of the patient, even after he had undergone a course of treatment for two months, was constantly at 140. The operation was finally performed by Professor Dudley, and a large tumour extracted, which involved three or four inches of sartorius muscle. It was remarkably heavy, and the greater portion of the interior converted into bone. In twenty-four hours after the removal of the tumour the pulse of the patient fell to ninety in the minute, and in a few days to the healthy standard.

The patient recovered rapidly without a single unfavourable symptom, and was, two years after the operation, one of the most active men upon his master's farm. If the tumour had been inflamed or the patient unusually irritable under nervous impressions, we might conjecture with some plausibility the cause of this unusual phenomenon. The fact that it was situated immediately over the femoral artery, and admitting that it might have pressed upon the vessel, (which it could not have done, in consequence of its superficial position, to an injurious extent,) throws no light upon the case. The general health of the patient seemed to be good from the first, and the rapidity with which the wound healed proved that he was in perfect health at the time when the operation was performed.

*Cadaveric Lesions in Yellow Fever.*—Dr. JOHN HARRISON, Prof. of Phys. and Path. in the Medical College of Louisiana, in an article, the publication of which is commenced in the *New Orleans Med. & Surg. Journ.*, (Sept. 1845,) gives the following as the result of his observations, made during thirteen years' practice in New Orleans, during ten of which he was connected with the Charity Hospital, as to the *post-mortem* appearances found in yellow fever. It is to be regretted that these results are not given in a more definite and precise form; still they are a useful contribution to our knowledge of the disease.

*The Skin.*—A few hours after death nothing is more common than to find all the lower or depending parts of the body in a state of congestion—literally black from accumulation of blood. And this is not confined to the external parts; we shall find the same thing at the base of the brain; in the depending portions of the intestines, and particularly of the ileum. We shall also find this congestion more or less in the lower portion of the lungs, and I believe it constitutes, in many cases, what is mistaken for inflammation of the stomach towards the cardiac orifice. As I have already observed, the tissues seem to be partly disorganized by the disease; they have lost, in a great degree, their natural elasticity; the capillary spaces are enlarged, and the blood settles down from the mere effect of gravity.

*The Brain* is sometimes congested with blood; at other times it contains a little water in the ventricles and under the arachnoid. The pia-mater is sometimes finely injected; the dura-mater is rarely affected, and, when so, presents only a few small sanguineous spots on its serous surface. In most cases, the brain presents no appreciable lesions whatever. The like may be said of the spinal marrow and sympathetic ganglia.

*The Lungs* are sometimes obviously congested with blood. They do not retract, as they usually do, when the sternum is removed. They are also, in parts, much discoloured. In one case, examined in 1839, a portion of the left lung, about the